## Case 18-15950-mdc Doc 72 Filed 02/14/23 Entered 02/14/23 15:55:09 Desc Main Document Page 1 of 4

Fill	I in this information to identify your c	ase:			
De	ebtor 1 Jessica Lee	Jackson			
	ebtor 2				
Un	nited States Bankruptcy Court for the	e: EASTERN DISTRICT	OF PENNSYLVANIA		
Ca	se number <b>18-15950</b>			Check if this is:	
(If k	(nown)		-	An amended filing	
				☐ A supplement showing postpetition chapt 13 income as of the following date:	ter
0	fficial Form 106I			MM / DD/ YYYY	
S	chedule I: Your Inc	ome		1	2/15
Pa	rt 1: Describe Employment				
1.	Fill in your employment				
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse	
1.	information.  If you have more than one job, attach a separate page with	Employment status	Debtor 1  ☐ Employed  ■ Not employed	Debtor 2 or non-filing spouse  ■ Employed □ Not employed	
1.	information.  If you have more than one job,	Employment status Occupation	☐ Employed  ■ Not employed	■ Employed	
1.	information.  If you have more than one job, attach a separate page with information about additional		☐ Employed	■ Employed □ Not employed	
1.	information.  If you have more than one job, attach a separate page with information about additional employers.  Include part-time, seasonal, or	Occupation	☐ Employed  ■ Not employed	■ Employed □ Not employed Correctional Officer	
1.	information.  If you have more than one job, attach a separate page with information about additional employers.  Include part-time, seasonal, or self-employed work.  Occupation may include student	Occupation Employer's name	☐ Employed ■ Not employed unemployment	■ Employed □ Not employed Correctional Officer SCI Chester State Prison 500 E 4th Street	
	information.  If you have more than one job, attach a separate page with information about additional employers.  Include part-time, seasonal, or self-employed work.  Occupation may include student	Occupation Employer's name Employer's address How long employed t	☐ Employed ■ Not employed unemployment	■ Employed □ Not employed Correctional Officer SCI Chester State Prison  500 E 4th Street Chester, PA 19013	
Pa Est	information.  If you have more than one job, attach a separate page with information about additional employers.  Include part-time, seasonal, or self-employed work.  Occupation may include student or homemaker, if it applies.	Occupation Employer's name Employer's address How long employed to	□ Employed ■ Not employed unemployment  here?	■ Employed □ Not employed Correctional Officer SCI Chester State Prison  500 E 4th Street Chester, PA 19013	
Pa Est spo	information.  If you have more than one job, attach a separate page with information about additional employers.  Include part-time, seasonal, or self-employed work.  Occupation may include student or homemaker, if it applies.  Include part-time, seasonal, or self-employed work.  Occupation may include student or homemaker, if it applies.	Occupation Employer's name Employer's address How long employed to the state you file this form. If the state you file this form than one employer, compare than one employer.	□ Employed ■ Not employed unemployment  here?  you have nothing to report for any	■ Employed □ Not employed Correctional Officer SCI Chester State Prison  500 E 4th Street Chester, PA 19013  6 months	

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 0.00 \$ 5,494.00

3. Estimate and list monthly overtime pay.

3. +\$ 0.00 +\$ 0.00

Deb	tor 1	Jessica Lee Jackson	-	C	Case number (if known)	18	-15950		
	Cop	by line 4 here	4.		For Debtor 1 \$0.00		or Debtor on-filing 5		
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a	١.	\$ 0.00	\$	1	,133.00	)
	5b.	Mandatory contributions for retirement plans	5b	).	\$ 0.00	\$		108.00	_
	5c.	Voluntary contributions for retirement plans	5c	<b>:</b> .	\$ 0.00	\$		0.00	)
	5d.	Required repayments of retirement fund loans	5d	l.	\$ 0.00	\$		0.00	)
	5e.	Insurance	5e		\$0.00	\$		343.00	_
	5f.	Domestic support obligations	5f.		\$ 0.00	-		0.00	
	5g. 5h.	Union dues Other deductions. Specify:	5g		\$ 0.00 \$ 0.00	\$ + \$		59.00 0.00	
_		· · · · · · · · · · · · · · · · · · ·	_						_
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$ 0.00	. \$		,643.00	_
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$0.00	. \$	3	,851.00	<u>)                                    </u>
8.	List 8a.	All other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	1.	\$ 0.00	\$		0.00	)
	8b.	Interest and dividends	8b		\$ 0.00	\$		0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c	<u>.</u>	\$ 0.00	\$		0.00	_
	8d.	Unemployment compensation	8d		\$ 0.00	- :		0.00	
	8e.	Social Security	8e		\$ 0.00	\$		0.00	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f.		\$ 0.00	\$		0.00	_
	8g.	Pension or retirement income	8g	,	\$ 0.00	\$		0.00	_
	8h.	Other monthly income. Specify: tax refund	_ 8n	۱.+ 	\$ 550.00	. + > . —		0.00	<u>)</u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	550.00	\$		0.0	00
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	550.00 + \$	-	3,851.00	= \$	4,401.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		Ψ_	330.00		<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	┤ <sup>¯</sup>	7,701.00
11.	State Inches other Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not acify:	depe		•	•	n <i>Schedul</i>	'e J. +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The resident that amount on the Summary of Schedules and Statistical Summary of Certain lies						\$	4,401.00
13.	Do	you expect an increase or decrease within the year after you file this form	?					Combi	ined ly income
		No.							

Official Form 106l Schedule I: Your Income page 2

Fill	in this informat	tion to identify yo	our case:							
Deb	btor 1 Jessica Lee Jackson				Check if this is:  An amended filing					
1	otor 2 ouse, if filing)								ring postpetition chapter the following date:	
`'	, 0,									
Unit	ted States Bankri	uptcy Court for the	: EASTE	RN DISTRICT OF PENNS	YLVANIA		M	M / DD / YYYY		
	se number 18	-15950								
0	fficial Fo	rm 106J								
		J: Your							12/1	
info	ormation. If m		eded, atta	. If two married people ar ich another sheet to this n.						
Par		ibe Your House	hold							
1.	Is this a join									
	■ No. Go to □ Yes. <b>Doe</b> s		in a separ	ate household?						
	□ No		·							
	□ Ye	es. Debtor 2 mus	st file Offici	al Form 106J-2, Expenses	for Separate House	ehold of D	ebtor	2.		
2.	Do you have	e dependents?	□ No							
	Do not list De Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relati			Dependent's age	Does dependent live with you?	
	Do not state								□ No	
	dependents i	names.			Daughter			8	■ Yes □ No	
					Daughter			12	■ Yes	
					-				□ No	
					Daughter				Yes	
									□ No □ Yes	
3.	expenses of	enses include f people other t d your depende	han $\square$	No Yes					_ ,	
exp	timate your ex		our bankr	ly Expenses uptcy filing date unless y y is filed. If this is a supp						
the		n assistance an		government assistance i cluded it on <i>Schedule I:</i> )				Your expe	enses	
(0)	noiai i Oilli 10	oi. <i>j</i>								
4.		r home owners d any rent for the		ses for your residence. I or lot.	nclude first mortgage	e 4.	\$_		1,117.00	
	If not includ	ed in line 4:								
	4a. Real e	state taxes				4a.	\$		0.00	
	•	rty, homeowner's				4b.			0.00	
		maintenance, re owner's associat		upkeep expenses dominium dues		4c. 4d.	- : -		0.00	
5.				our residence, such as ho	me equity loans		\$ _		0.00	

Debtor 1 Jessica Lee Jackson	Case number (if known)	18-15950						
5. Utilities:								
6a. Electricity, heat, natural gas	6a. \$	400.00						
6b. Water, sewer, garbage collection	6b. \$	100.00						
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	280.00						
6d. Other. Specify:	6d. \$	0.00						
Food and housekeeping supplies	7. \$	800.00						
Childcare and children's education costs	·							
	8. \$	0.00						
Clothing, laundry, and dry cleaning	9. \$	80.00						
). Personal care products and services	10. \$	0.00						
. Medical and dental expenses	11. \$	0.00						
2. <b>Transportation.</b> Include gas, maintenance, bus or train fare.	40 0	250.00						
Do not include car payments.	12. \$	250.00						
B. Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	0.00						
Charitable contributions and religious donations	14. \$	0.00						
5. Insurance.								
Do not include insurance deducted from your pay or included in lines 4 or 20.								
15a. Life insurance	15a. \$	84.00						
15b. Health insurance	15b. \$	0.00						
15c. Vehicle insurance	15c. \$	495.00						
15d. Other insurance. Specify:	15d. \$	0.00						
Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.	· · · ·	0.00						
Specify:	16. \$	0.00						
/. Installment or lease payments:	··· · ·	0.00						
17a. Car payments for Vehicle 1	17a. \$	690.00						
17b. Car payments for Vehicle 2	17b. \$	252.00						
17c. Other. Specify:	17c. \$	0.00						
	17d. \$							
17d. Other. Specify:		0.00						
<ol> <li>Your payments of alimony, maintenance, and support that you did not report a deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I)</li> </ol>		0.00						
Other payments you make to support others who do not live with you.	).	0.00						
Specify:	19.	0.00						
· · ·								
Other real property expenses not included in lines 4 or 5 of this form or on Sci	20a. \$	0.00						
20a. Mortgages on other property	· —	0.00						
20b. Real estate taxes	20b. \$	0.00						
20c. Property, homeowner's, or renter's insurance	20c. \$	0.00						
20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00						
20e. Homeowner's association or condominium dues	20e. \$	0.00						
. Other: Specify:	21. +\$	0.00						
	·							
2. Calculate your monthly expenses	_							
22a. Add lines 4 through 21.	\$	4,548.00						
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$							
22c. Add line 22a and 22b. The result is your monthly expenses.	\$	4,548.00						
		-,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
3. Calculate your monthly net income.								
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	4,401.00						
23b. Copy your monthly expenses from line 22c above.	23b\$	4,548.00						
		,						
23c. Subtract your monthly expenses from your monthly income.	_	4 4 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4						
The result is your monthly net income.	23c. \$	-147.00						
	·							
Do you expect an increase or decrease in your expenses within the year after you file this form?								
For example, do you expect to finish paying for your car loan within the year or do you expect your car loan within the	our mortgage payment to incr	ease or decrease because o						
modification to the terms of your mortgage?								
■ No.								
☐ Yes. Explain here:								